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SERIAL NUMBER 10/627,310	FILING DATE 07/25/2003  RULE	CLASS 435	GROUP ART UNIT 1653	ATTORNEY DOCKET NO. ADY-009
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APPLICANTS

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*Rm*

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/401,389 08/05/2002

*NONE*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 02/12/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 10
Verified and Acknowledged	Allowance <i>Rm</i> Examiner's Signature	<i>Rm</i> Initials			

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TITLE  
 Methods for treating diabetes and insulin resistance

FILING FEE  RECEIVED 2548	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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